

North Carolina Association of Rescue & E.M.S., Inc.

Technical Rescue of the Year Award

APPLICATION FORM

Squad Name _____

Address _____

E-mail address _____

Captain _____

Personnel on the rescue _____

Date of the Rescue _____

Complete details of the rescue (Use attachments, if necessary)

Signature of Person submitting entry

**Return to: N. C. Association of Rescue & EMS, Inc
PO Box 1914
Goldsboro, NC 27533-1914**

DEADLINE: May 1